Back Panel Heading

If I am selected, I understand and agree to participate in the clinic in its entirety and will continue to volunteer my services as a Mountain Search Pilot. My check in the amount of \$75.00 is enclosed with the understanding that it will be refunded if I am not selected to attend. Applications and the \$75.00 registration fee must be received at the MDT Aeronautics Division office (PO Box 200507, Helena MT 59620-0507) NO LATER THAN AUGUST 18, 2008.

Hotel Accommodations

Night of the 5th

Room needed? Y N

Night of the 6th

Room needed? Y N

MDT attempts to provide accommodations for any known disability that may interfere with a person participating in any service, program or activity of the Department. Alternative accessible formats of this information will be provided upon request. For further information call (406) 444-6331 or TTY (406) 444-7696.

Montana Department of Transportation



Montana Dept. of Transportation Aeronautics Division

Aeronautics Division 2630 Airport Rd PO Box 200507 Helena MT 59620-0507

Phone: 406-444-2506 Fax: 406-444-2519 Email: kdimick@mt.gov

Montana Dept. of Transportation Aeronautics Division Mountain Search Pilot Clinic Sept. 5, 6 & 7, 2008 The clinic will kickoff at the Wingate Inn. Registration fee \$75.00. Rooms have been reserved, at state rates, at the Wingate Inn located at 2007 North Oaks, Helena MT. We will send the Wingate Inn a rooming list prior to check in. However, the participant is responsible for payment upon arrival. Please be sure to indicate your lodging preferences on the back of the registration form. If lodging is not specified it will be assumed that you have made other arrangements. Registration must be received by MDT Aeronautics NO LATER THAN AUGUST 18, 2008.

Mountain Search Pilot Clinic

The Montana Department of Transportation Aeronautics Division is inviting 24 registered volunteer search pilots to attend the 30th annual MOUNTAIN SEARCH PILOT CLINIC. A limited number of pilots who have completed the Mountain Search Pilot Clinic in the years of 1979 - 2006 will be accepted for refresher training.

The clinic ground school and the flight training operations will headquarter at the Helena Regional Airport September 5 - 7, 2008. The clinic will kickoff on Friday, September 5th at 1900 with a mountain flying ground school at the Wingate Inn. Any interested person is invited to attend the ground school session.

A total of two hours dual flight instruction in mountain search flying techniques will be provided on Saturday and Sunday in rugged mountainous terrain. Instruction and operation of ELT direction finders and outdoor survival instruction will be provided Saturday and Sunday. Pilots will be scheduled for these sessions while awaiting flight-training schedules. The ground school will continue on Saturday evening at 1900 at the Wingate Inn.



Class Schedule

sions will run from 0630 to 2300 with very little time to socialize. If selected to participate you must agree to attend all sessions in full. With these conditions in mind, we ask that you do not bring spouses, friends or children.

The clinic is very fast paced and intense. The ses-

Registration

The registration fee to attend the clinic is \$75.00.

A block of rooms have been reserved at the Wingate Inn located at 2007 North Oaks, Helena, MT. We will send the Wingate Inn a rooming list prior to check in. However, the participant is responsible for payment upon arrival.

Please be sure to indicate your lodging preferences on the back of the registration form. If lodging is not specified it will be assumed that you have made other arrangements.

REQUIREMENTS FOR ACCEPTANCE

- You must be a Montana registered pilot with the MDT Aeronautics Division.
- You must agree to be in attendance, on time, and remain for the duration of all scheduled sessions. Registration will be held at the Wingate Inn, on Friday, September 5, from 1800 to 1900. <u>The first session begins promptly</u> at 1900 on Friday.

REGISTRATION FORM RETURN TO MDT AERONAUTICS NO LATER THAN AUGUST 18, 2008

Name:
Address:
City:
State: Zip:
Phone:
Email:
W. L. L. L.
Weight, please mandatory:
FAA Type License:
Ratings held:
kulligs nera:
High performance endorsement: Y N
Tail wheel PIC time:
Cessna 182 PIC Time:
Cessna 206 PIC Time:
Date of last flight review:
Date of last medical:
I am registered as a MSP Volunteer: Y N
Total Flight Hours:
Previous 12 months:
I have volunteered my aircraft for search: Y N
I previously attended the MSPC in: